

PURCHASE REQUEST

B 20919

DATE	ALLOT. NO.	COST CENTER	OBJ. CODE	CONTRACT NO.
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ON OR BEFORE:

BILL TO: SEND 3 COPIES OF INVOICE
Property and Procurement
12th Floor — Andrew Johnson Tower
TN Dept. of Health
Nashville, TN 37247-0315
(615) 741-3843

**VENDOR
I.D. NO.:**

F.O.B. DESTINATION
PREPAY AND ADD FRT.
CASH DISCOUNT _____

AGENCY CODE: _____
DELIVERY SUBCODE: _____

TOPS NO.:

[illegible]

TOTAL →

ADDITIONAL ACCOUNTING INFORMATION; 343:

B 20919

[illegible]

UNIT AUTHORIZATION: _____

BUREAU AUTHORIZATION: _____

OTHER AUTHORIZATION: _____